

CLAIMS ONLY						Application Number <i>10/699738</i>	Filing Date	
						Applicant(s)		
May be used for additional claims or amendments:								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/							
2		/						
3			/					
4				/				
5					/			
6		/						
7			/					
8				/				
9					/			
10						/		
11							/	
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								
33								
34								
35								
36								
37								
38								
39								
40								
41								
42								
43								
44								
45								
46								
47								
48								
49								
50								
Total Indep.		/						
Total Depend	15							
Total Claims	16							